



## Report of Property Presumed Unclaimed

Name of Holder \_\_\_\_\_ Name of Contact \_\_\_\_\_  
Address \_\_\_\_\_ Address \_\_\_\_\_  
Address \_\_\_\_\_ Address \_\_\_\_\_  
City, ST, Zip \_\_\_\_\_ City, ST, Zip \_\_\_\_\_  
Phone \_\_\_\_\_ E-Mail \_\_\_\_\_ Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

For Dept. Use Only

1. FEIN: _____ Ext #: _____	2. Account ID: _____
3. Report Year: _____	4. Report #: _____ Your original report is considered report #1, please see instructions. If this is an amended return, check here. <input type="checkbox"/>
5. If you are no longer in business and want your account cancelled, check here. <input type="checkbox"/> Enter final date. _____	6. If your address has changed, check here. <input type="checkbox"/>

### Section I:

☐ Non Life Insurance Company Holder Report  
(Report Year July 1 through June 30)

☐ Life Insurance Company Holder Report  
(Report Year January 1 through December 31)

Total number of properties being reported \_\_\_\_\_

Amount remitted \$ \_\_\_\_\_

The amount remitted is for all items held and owing that have remained unclaimed, unpaid and are presumed abandoned/unclaimed. The amount remitted is the total from Section II, page 2, Owner Information. Please remit only one check and make it payable to Montana Department of Revenue.

Number of shares reported \_\_\_\_\_

The number of shares reported is the total from Section III, page 2. Please see the instructions, found on page 7, for information related to the transfer of securities or call us at the phone number below.

I, the undersigned, declare under penalty of perjury, that to the best of my knowledge and belief, the following is a true and complete report of unclaimed property now in possession or under control of the holder, which is presumed unclaimed in accordance with Montana law, 70-9-801 through 70-9-829, MCA. Written notice has been sent to the apparent owner as prescribed under Montana law, 70-9-808(5), MCA.

Name of Officer or Holder Authorized to Sign Report (please print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Mail this report and remittance to:  
Unclaimed Property, Montana Department of Revenue, PO Box 5805, Helena MT 59604-5805  
Questions? Call (406) 444-6900

## Report of Property Presumed Unclaimed

<b>Section II:</b>						
	Column 1 NAUPA property type code	Column 2 Date of last transaction/ date payable	Column 3 Amount due owner	Column 4 Owner's social security number or federal identification number	Column 5 Name of owners-list alphabetically by last name, first name, middle initial	Column 6 Last known mailing address: street, city, state, zip code
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
Amount remitted			\$			

<b>Section III: CUSIP number _____</b>						
	Column 1 NAUPA property type code	Column 2 Date of last transaction/ date payable	Column 3 Number of shares	Column 4 Owner's social security number or federal identification number	Column 5 Name of owners-list alphabetically by last name, first name, middle initial	Column 6 Last known mailing address: street, city, state, zip code
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
Number of shares reported						

## Report of Property Presumed Unclaimed

### Instructions for Reporting Property

If you have questions, please call us at (406) 444-6900.

#### General Information

**What is Unclaimed Property?** Any financial asset for which an owner has not generated activity during a period of time (see reporting requirements below). These assets may include uncashed checks, savings, checking, payroll (wages, bonuses, commissions), credit balances, money orders, customer deposits, travelers checks, stocks and bonds (uncashed dividends, interest checks, underlying shares principle), insurance proceeds, certificates of deposit, and other intangible interests or benefits.

**What is the Holder's Responsibility?** The holder of unclaimed property must send written notice to the apparent owner of property with a value exceeding \$50, not more than 120 days or less than 60 days before filing the report.

#### Reporting Requirements

(70-9-803, MCA)

##### 1 Year

Company dissolution  
Class action court judgment  
Court or government agency  
Wages and bonuses  
Utility deposits from customers

##### 3 Years

Credit memo or refund  
Gift certificate  
Life insurance  
IRA/earliest date of distribution

##### 4 Years

State state warrants

##### 5 Years

Stock or equity interest  
Debt/interest payment  
Demand, savings of time deposit  
\*Contents of safe deposit boxes  
Cashier's checks  
Commissions

##### 7 Years

Money orders

##### 15 Years

Traveler's checks

**\*Contents of Safe Deposit Boxes:** All contents of the safety deposit box must be reported and delivered to us. Nothing may be destroyed. Contents could include, for example, money, jewels, stock certificates, bonds, life insurance policies, promissory notes, deeds, leases, mortgages, contracts, wills or, automobile ownership certificates. Please attach Inventory Listing Sheet, Form UCH-2, for each box.

#### Important Reporting Information

- Retain a copy of the filed report for your records and mail the original, with your remittance, to us.
- We will consider a dormancy charge (service charge) to be lawful only if a valid written and enforceable contract exists between the holder and the owner under which the holder may impose the charge. If the charge is regularly reversed or otherwise canceled, that charge must not be withheld from the payment to the State of Montana. (70-9-806, MCA)
- All property must be reported and remitted. However, the detail information regarding the unclaimed property owner is not required for items where the owner is unknown.

## Filing Options

**Electronic Filing:** A holder report can be filed electronically through a secure file transfer process. To learn more, please go to [mt.gov/revenue/](http://mt.gov/revenue/), click on “For Businesses”, and select “Unclaimed Property Holders” from the drop down list.

Please follow these instructions when submitting your report electronically:

- The report must be in a text file. Do not provide your report in an executable file format, as a statewide policy for Montana will not allow us to accept this format from an external source.
- The text file must be in the current NAUPAll format, which may be obtained at <http://www.wagers.net/hrs>.
- Do not encrypt the file.
- Do not password-protect the file.

**Paper Filing:** Please follow the instructions below.

### Instructions for Page 1

Line 1 Enter your federal employer identification number (FEIN) on line 1. If you are filing for more than one location, please include your extension number for the specific location that is reporting.

Line 2 If you know your Account ID, please provide on line 2.

Line 3 Enter the report year that applies to this report.

Life insurance companies' report year for unclaimed property is the period of January 1 through December 31. The report is due on May 1st of the following year.

All other holders' report year for unclaimed property is the period of July 1 through June 30; the report is due on November 1 of that year.

Line 4 You may report more than once a year. In order to correctly process the additional reports as such, please indicate the report number on line 4. Your original report is always considered report #1. If you are amending a prior-period report, check the box on line 4. Amended is defined as notification that the original report was inaccurate and the amended report replaces that report in its entirety.

Line 5 If you are no longer in business and are filing a final report, check the box on line 5 and enter the date that your business ceased operations.

Line 6 If your address has changed from the last report filed, check the box on line 6.

### Section I:

- Check the type of holder report being submitted.
- Enter the total number of properties you are reporting.
- The amount remitted is for all items held and owing that has remained unclaimed, unpaid and is presumed abandoned/unclaimed. The amount remitted is the total from Section II, page 2, Owner Information. Make check payable to Montana Department of Revenue.
- The total number of shares reported is the total from Section III, page 2. Please see the instructions, found on page 7, for information related to the transfer of securities or call us at (406) 444-6900.

## Instructions for Page 2

You may photo copy page 2 of this report if additional space is needed. A computer printout is acceptable in place of Section II and Section III of this report. The printout must contain the same information in the same format as this report. If a printout is used, the print size must be at least a 10-point font. Attach a copy of the printout to page 1 of this report.

Please note: If you are reporting unclaimed mineral property, you must use Report of Property Presumed Unclaimed Trust for Unlocatable Mineral Owners (UCM-1).

### Section II:

➤ Please complete all columns.

Column 1 Enter the NAUPA property type code for each property reported. A detailed list of NAUPA codes is included in these instructions for your convenience.

Column 2 Enter the date of the last transaction or date payable for the property being reported.

Column 3 Enter the amount due each owner.

Column 4 For each owner, enter the social security number or federal employer identification number.

Column 5 In alphabetical order, list each owner by last name, first name, middle initial.

- In the case of unclaimed funds held or owed under any life or endowment insurance policy or annuity contract, list the name of the insured or annuitant and the name of the beneficiary.
- In the case of unclaimed insurance policy benefits, list the insured's or annuitant's name first and beneficiary's name second.
- In the case of custodial or trustee accounts, list the owner's name first and the custodian's or trustee's name second.
- In the case of cashier's checks or money orders, list the payee's name first and the remitter's name second.

Column 6 For each owner, provide the last known mailing address including street, city, state, and zip code.

### Section III:

➤ Please provide the CUSIP number for the securities being reported.

➤ Please complete all columns.

Column 1 Enter the NAUPA property type code for each property reported. A detailed list of NAUPA codes is included in these instructions for your convenience.

Column 2 Enter the date of the last transaction or date payable for the securities being reported.

Column 3 Enter the number of shares for each owner.

Column 4 For each owner, enter the social security number or federal identification number.

Column 5 In alphabetical order, list each owner by last name, first name, middle initial.

Column 6 For each owner, provide the last known mailing address including street, city, state, and zip code.

## NAUPA Adopted Standard Property Type Codes

The following codes have been endorsed by NAUPA for use by each state in the development of standard reporting; however, some states do not currently accept these codes. The State of Montana's agreement to utilize these codes is a step toward standardization in unclaimed property reporting.

Code	Description
<b>Account Balances Due</b>	
AC01	Checking Accounts
AC02	Savings Accounts
AC03	Mature CD or Savings Certificate
AC04	Christmas Club Funds
AC05	Money on Deposit to Secure Fund
AC06	Security Deposits
AC07	Unidentified Deposit
AC08	Suspense Accounts
AC99	Aggregate Account Balances
<b>Uncashed Checks</b>	
CK01	Cashier's Checks
CK02	Certified Checks
CK03	Registered Checks
CK04	Treasurer's Checks
CK05	Drafts
CK06	Warrants
CK07	Money Orders
CK08	Traveler's Checks
CK09	Foreign Exchange Checks
CK10	Expense Checks
CK11	Pension Checks
CK12	Credit Checks or Memos
CK13	Vendor Checks
CK14	Checks Written-off to Income
CK15	Other Outstanding Official Checks
CK16	CD Interest Checks
CK99	Aggregate Uncashed Checks
<b>Court Deposits</b>	
CT01	Escrow Funds
CT02	Condemnation Awards
CT03	Missing Heirs' Funds
CT04	Suspense Accounts
CT05	Other Court Deposits
CT99	Aggregate Court Deposit

Code	Description
<b>Insurance</b>	
IN01	Individual Policy Benefits or Claim Payments
IN02	Group Policy Benefits or Claim Payments
IN03	Proceeds Due Beneficiaries
IN04	Proceeds from Matured Policies, Endowments or Annuities
IN05	Premium Refunds
IN06	Unidentified Remittances
IN07	Other Amounts Due Under Policy Terms
IN08	Agent Credit Balances
IN99	Aggregate Insurance Property
<b>Miscellaneous Checks and Tangible Personal Property</b>	
MS01	*Wages, Payroll, Salary
MS02	*Commissions
MS03	Workers Compensation Benefits
MS04	Payments For Goods and Services
MS05	Customer Overpayments
MS06	Unidentified Remittances
MS07	Unrefunded Overcharges
MS08	Accounts Payable
MS09	Credit Balance — Accounts Receivable
MS10	Discounts Due
MS11	Refunds Due
MS12	Unredeemed Gift Certificates
MS13	Unclaimed Loan Collateral
MS14	Pension and Profit Sharing
MS15	Dissolution or Liquidation
MS16	Misc. Outstanding Checks
MS17	Misc. Intangible Property
MS18	Suspense Liabilities
MS99	Aggregate Misc. Property

Code	Description
<b>Securities</b>	
SC01	*Dividends
SC02	*Interest (Bond Coupons)
SC03	Principal Payments
SC04	Equity Payments
SC05	Profits
SC06	Funds Paid to Purchase Shares
SC07	Funds for Stocks and Bonds
SC08	Shares of Stock (Returned by Post Office)
SC09	Cash for Fraction Shares
SC10	Unexchanged Stock of Successor Corp
SC11	Other Certificate of Ownership
SC12	*Underlying Shares or Other Outstanding Certificates
SC13	Funds for Liquidation/Redemption of Un-surrendered Stock or Bonds
SC14	Debentures
SC15	U S Govt Securities
SC16	Mutual Fund Shares
SC17	Warrant (Rights)
SC18	Mature Bond Principal
SC19	Dividend Reinvestment Plans
SC20	Credit Balances
SC99	Aggregate Security Related Cash
<b>Trusts, Investment and Escrow Accounts</b>	
TR01	*Paying Agent Account
TR02	*Undelivered or Uncashed Dividends
TR03	Funds held in Fiduciary Capacity
TR04	Escrow Accounts
TR05	Trust Vouchers
TR99	Aggregate Trust Property
<b>Utilities</b>	
UT01	Utility Deposits
UT02	Membership Fees
UT03	Refunds or Rebates
UT04	Capital Credit Distributions
UT99	Aggregate Utilities
ZZZZ	Properties Not Identified Above

\* Please specify the date range on "periodic payments" if there are multiple amounts of the same property type being reported for a single property owner.